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Subject:

Council Speaker Registration/Testimony

tration/Testimony

All fields marked "(*)" are required and must be completed in order for this form to be valid. Note: Registrations are not accepted prior to the agendas being posted.

Name(*)

ROBERTS LEINAU

Phone (*)

638-7010

Email (*)

leinaur001@hawaii.rr.com

Meeting Date (*)

2015-08-05

Council/PH Committee (*)

Council

Agenda Item (*)

Bill 53, FD1

Your position on the matter (*)

Support

Representing (*)

Self

Organization

Do you wish to speak at the hearing?

(*)

No

Written Testimony

No development at malaekahana in the Koolau Sustainability

Plan

Testimony Attachment

Accept Terms and Conditions (*)

1 .

MISC. COM. _

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Council